U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U-

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

3. Name and address of person filing.			4. Name	4. Name, file number, and address of labor organization.					
Name	Denise E Brown			Name	Name Amalgamated Transit Union Local 1028				
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Name of Person Filing Denise Brown	File Number U -							
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or otherwork of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or individually dealing with your labor organization or with a trust in which your labor organization.	vise dealing with the business rely seeking to represent, or irectly to, or otherwise							
8. Name and address of Business (including trade name, if any). Name Dowd, Bloch & Bennett Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 8 South Michigan Avenue-19th Floor City Chicago State Illinois ZIP Code +4 60603-3315	9. Business deals with: a. Labor Organization b. Trust c. Employer							
	11.a. Nature of such dealing.							
10. If 9.b. or 9.c. is checked give trust or employer's name.	$\label{thm:control_control} \begin{picture}(1,0) \put(0,0) \put($							
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	Attorney of Labor Union							
	11.b. Approximate dollar value of such dealing.	\$17,284						
City	12.a. Nature of interest held or income received.							
State ZIP Code + 4	Christmas can of Popcorn							
	12.b. Amount.	\$27						
C. Received from any employer (other than an employer covered under parts Å and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.								
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	The state of the s	erosinistist. Pritter kuutumin meneristististen tile vieturististen kannata oli enemenen oli enemenen että 2000 varvusta 2000 oli enemenen että 2000 varvusta 2000 oli enemenen että 20						
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13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.							